

## DOCUMENT RESUME

ED 294 341

EC 202 508

AUTHOR Berrigan, Carol  
TITLE Integration in Italy: A Dynamic Movement.  
PUB DATE Oct 87  
NOTE 15p.; Paper presented at the Annual Conference of the Association for the Severely Handicapped (14th, Chicago, IL, October 29-30, 1987).  
PUB TYPE Viewpoints (120) -- Reports - Descriptive (141) -- Speeches/Conference Papers (150)  
EDRS PRICE MF01/PC01 Plus Postage.  
DESCRIPTORS Attitudes; \*Civil Rights; \*Disabilities; Elementary Secondary Education; Employment Opportunities; Foreign Countries; \*Mainstreaming; \*Normalization (Handicapped); Political Attitudes; \*Public Policy; Social Attitudes; Special Education; Trend Analysis  
IDENTIFIERS \*Italy

## ABSTRACT

The result of trips by American special educators to Italy in 1984 and 1986, this paper reviews laws, public policy, and events in Italy's recent history leading to widespread desegregation of the disabled special schools and other institutions. The review of legislation focuses on National Law 517 (1977) with such specified strategies for pupil integration as the following: maximum size of integrated classes is 20 students; extracurricular activities must include all students; classes tracked by ability are abolished; traditional grading is abolished and replaced by overall assessments. Integration of the disabled is seen to be an ethical issue with segregation effectively intensifying the disability. Supportive elements in the Italian integration movement have included interdisciplinary support teams to help the teacher; a sense of shared responsibility by parents, teachers, and the community at large; a commitment to educating the public; and the influence of strong charismatic leaders. Integration in the work place has had strong union support with an emphasis on on-the-job work experience and training rather than prevocational or vocational training. Comparison with the United States indicates Italy is placing more emphasis on a political commitment to integration and less emphasis on development of academic and other skills. (DB)

\*\*\*\*\*  
\* Reproductions supplied by EDRS are the best that can be made \*  
\* from the original document. \*  
\*\*\*\*\*

## Integration in Italy: A Dynamic Movement

Carol Berrigan

U.S. DEPARTMENT OF EDUCATION  
Office of Educational Research and Improvement  
EDUCATIONAL RESOURCES INFORMATION  
CENTER (ERIC)

This document has been reproduced as  
received from the person or organization  
originating it.

Minor changes have been made to improve  
reproduction quality.

Points of view or opinions stated in this docu-  
ment do not necessarily represent official  
OERI position or policy.

Italy has forged a much-heralded and widespread movement for integration of students and adult workers who have disabilities. UNESCO and OECD (Organization for Economic Cooperation and Development) observers cite Italy's integrated programs as the finest in Europe. Italy's move to close segregated, specialized institutions came after close examination revealed that institutional populations were increasing, while the quality of life for people with disabilities was decreasing. In addition, when special educators, psychologists, medical doctors, and social workers worked in segregated settings they found that they themselves contributed to the negative results.

During the Spring of 1984 and 1986, participants in seminars in Italy sponsored by the Division of Special Education and Rehabilitation, Syracuse University, observed schools and work sites throughout Italy. They also met with Italian leaders of the movement in the cities of Florence, Rome, Parma, Bologna, and Arezzo. In the visits and conversations a common theme was "Inclusion of all people with disabilities is a moral issue, which is more important than the legal mandate."

### New Legislation

Through the 1960s, Italy had special education laws, dating back to the 1920s, which vaguely referred to the "care of abnormal children and the setting-up of special

PERMISSION TO REPRODUCE THIS  
MATERIAL HAS BEEN GRANTED BY

*Carol Berrigan*

schools." The government's chief involvement was that of funding special schools once they had been established. A system of radical change began in the late 1960s. A strong anti-segregation movement emerged as part of a political and social movement centered on guaranteeing fundamental human rights.

Serious questioning of segregated schools and institutions resulted in new legislation. The first was on March 30, 1971, when the Italian legislature adopted National Law 118 which established the right of compulsory education for children with disabilities in regular classes of public schools. In 1975, a Ministerial Circular law (Circolare 227) stated explicitly that the severity of the disability must not prevent integration. Two years later, in 1977, National Law 517 specified strategies for integration of students with disabilities which included:

- (1) maximum size of integrated classes is 20 pupils;
- (2) maximum number of pupils with handicaps per class is 2 (in practice there is usually 1);
- (3) extracurricular activities must include all students;
- (4) special services responding to needs of individual students must be integrated into the classroom;
- (5) classes tracked by ability are abolished;
- (6) marks are abolished and in their place are overall assessments;

- (7) support teachers are teamed with regular teachers for integrated classes, both teachers interacting with all students to mitigate stigma.

Summarily, the laws of the 1970s gave children with disabilities a constitutional right to obtain compulsory education and the right to attend regular classes. Compulsory education in Italy covers eight years of schooling: five years of elementary school (typical starting age of 6) and three years of lower secondary school (typical starting age of 11). Schools cannot legally refuse a student with a disability.

Educational centers for young children are the responsibility of local government. Nursery school (nido) is the age group 0-3; kindergarten or preschool (scuola materna) is for the age group 3-6. In all cities where members of the Syracuse University seminars visited, nursery schools and kindergartens were integrated.

#### An Ethical Factor: A Belief System

In addition to the legal measures enacted by the Italian Legislature, there was an ethical factor: a belief that members of society who are "different," whether it be in appearance, in intellectual capacity, or productivity in work, have the right to full participation in society. There was the conviction that placing people who are "different" in institutions which are specially focused on their "difference," is the best way of insuring that they remain different. The Italian leaders frequently said that integration as mandated by law is not the same as a solution

or cure for the disability but is an effort to avoid intensifying the effects of the disability, as occurs with segregation.

Italian leaders said they realized that the presence of people with disabilities in ordinary educational institutions would create some problems: changes (often unsettling) were necessary, fears needed to be overcome, and new challenges would occur in day-to-day living. But they were convinced of an enormous positive effect: people with disabilities have something to offer, and both, abled and disabled, learn from each other.

The issue of disability is not seen in Italy as just a question of improving services: it is seen in a societal context. Integrating people with disabilities in society means that all its members are responsible in one way or another for accepting the challenge, not just professionals in the field.

#### Supportive Elements in the Italian Integration Movement

As the movement toward integration evolved in Italy, four elements emerged as necessary to the success of the movement.

##### 1. Support teams.

When the special institutions and psychiatric hospitals were closed, there was a reorganization of mental health services into decentralized units for each region of the country. Members of mental health units operate as the support team and include physicians, psychologists, social workers, nurses, speech therapists, and special education

teachers. The members of the team are known as operatori sociali (support teams). Their organization varies slightly from one region to another but is essentially the same throughout Italy. The team's role is supportive to the classroom. Members of the team are there to help the teacher. Despite the medical status of some team members, there is a conscious effort not to behave as the final authority on the child's condition, treatment, or program. The aim is to share responsibility with classroom teachers. These teams also coordinate any services needed by the student with a disability. The involvement of the team in the life of a child with a disability varies. For example, more help is needed when the child first starts regular school. However, the team becomes less necessary as the child becomes more integrated in school and community.

## 2. Sharing the responsibility.

In Italy the committed involvement of parents, of teachers, and of the community at large to promote integration in the schools has forged an effective coalition. The three groups share the responsibility of working for integrated education for children with disabilities. The diversity of involved people helped to create an alternative to the traditional medical model of services for children with disabilities.

## 3. Educating the public.

The task of educating the public is shared by teachers, parents, and members of the support teams. The media, especially local television, is tapped as a powerful vehicle

for this process. In some areas there are regular programs on disability issues and open forums where parents can discuss their problems.

Many of the leaders for integration in the various regions of the country share the opinion that changes in values and attitudes best happen when students with disabilities actually turn up in the schools or places of work. From the beginning of the movement in the early '70s, integration proponents maintained that to wait for attitude change before integrating was totally unrealistic; rather, they maintain that changes take place in response to actual situations, not to abstract concepts.

#### 4. Charisma.

Most agree that the integration movement in Italy was sparked by the early efforts of a few charismatic individuals who, through their ardent belief in the importance of integration and their position in their regions, were able to initiate and win the first and most important public arguments. They created models. Following are some comments from a few of these early leaders.

The late Dr. Adriano Milani Comparetti of Florence, director of the very large institution for people with cerebral palsy and retardation in Florence, Torrigiani, which he helped close in 1968, said to the Syracuse University seminar in Italy in 1984:

There must be full integration based on the affirmation of the handicapped child's right not to be segregated; this thesis is not derived from abstract or ideological

principles, but from broad experience indicating that socialization is the best instrument for bringing about integration--indeed one cannot exist without the other. In other countries of Europe where integration plans prescribe that handicapped children must first be given all possible technical assistance, schools might never begin to integrate. There must be some risk taking and openness to change. Of course we have had and still have growing pains, but we also have a continuous, ongoing improvement of programs.

In Rome, Dr. Nora Ferro is a psychologist and part of a support team, as well as a member of the faculty of the University of Rome. In May, 1986, in a discussion in Rome with members of the Syracuse University seminar, she said:

We knew that people should not be segregated in a special place just because they were handicapped. We had to find a way that would allow handicapped people to live with others. We started in the early 1970s without knowing all the answers. But if we waited, handicapped students were losing years, and we might never begin. Instinctively we knew it was the only way. But we also did research and experimented to show the fainthearted that it was possible. When we began in the early '70s we felt we had to be rigid, not flexible. With social change there is pain because systems tend to persevere the way they are. In hindsight we see how our rigidity dictated that all handicapped children be with nonhandicapped children

all school hours with sometimes little or no curriculum adaptation so as to normalize the school experience as completely as possible. We created a crisis. That crisis effected social change. The rigidity with its ensuing pain was not our intention. Afterward we understood what had happened, how social change had occurred. No one is ever prepared enough for social change. Those who do not want to change are the ones who say, "We are not prepared enough."

From Dr. Franca Cavara Mediolli of the University of Parma who led the integration movement in the city of Parma:

In the beginning we stopped labeling and testing because that was for separation. Labeling is necessary when you have to separate people. Now we have some testing but only for making programs individual, not for classification. It is not useful for a teacher to know what category a child fits in--but to know a child's strength and weakness. You create supports for a child, not a separate place.

### Integrated Employment

Members of the Syracuse University seminar visited work sites in various cities. In Parma the leader of integrated employment is Vincenzo Bagnasco, who spearheaded the movement towards open employment for people with disabilities in 1967. The thrust was away from the existing special institutions and sheltered workshops. Important ground work was done by unions who maintained that it is more important for human beings, including people with

disabilities to work with dignity than for industry make a big profits. Debates occurred between the workers and management. Some managers were agreeable. But in other cases, unions resorted to strikes for the right to work for people with disabilities. Some managers were willing to settle on personal kindness, but the unions insisted on more: the inherent right to work for everyone, which had to include people with disabilities.

Prevocational or vocational training was found to be of little use and an unnecessary delay for actual work experience. Consequently, people with disabilities are placed into a real work situation with a two-year apprenticeship. A modest stipend during the apprenticeship is funded by the regional government. Usually, after the two years, the apprentice is hired at regular salary by private or public industries. Sometimes some adaptation is needed in the workplace, but this has not been a problem. The two year apprenticeship is flexible; some people have been ready in one year, others have needed a longer time. The ratio of job mentor to apprentice depends on the need; it ranges from seven apprentices to one coach, to a one-to-one relationship.

In Parma, the success of integration in the workplace is highly correlated with the relationship between the worker with a disability and other workers. They found that the actual presence of the worker with a disability was the most effective approach in dispelling fears and prejudice among nondisabled workers.

### A Comparison

A member of the 1984 Syracuse University seminar commented, "Italy's law is on the surface socially light years away from our law." He was impressed, as were all the seminar participants, by the Italian use of the word integration: "It was always said with a kind of political force that transcended our dry term, mainstreaming."

The seminar participants were in awe of the commitment to integration that was seen and heard in every city visited. This was a national movement, lived out in every region of Italy. However, at the same time there was concern among some seminar members that social integration was the primary goal and skill building and academic areas were sacrificed. One participant opined, "There is no place for developing pedagogic technologies for the handicapped as we strive for in the States." Our Italian hosts rejoindered, "That will come eventually. If we waited for all things to be in place we might never have begun."

Indeed, members of the 1986 Syracuse University seminar in Italy observed increasing academic refinement in the schools revisited. Italians do not claim to have all the answers; they readily acknowledge mistakes. But their fundamental belief that integration of all people is a moral issue fuels the movement to be dynamic, progressive, and, most important, evolving.

For information on the 1988 Syracuse University seminar Italy, May 22 - June 10, contact Carol Berrigan, Center on Human Policy, Syracuse University, 724 Comstock Avenue, Syracuse, NY 13244; (315) 423-3851.

Carol Berrigan, Ph.D., is on the staff of the Center on Human Policy and a member of the faculty of the Division of Special Education and Rehabilitation, Syracuse University.

## ABSTRACT

### Integration in Italy: A Dynamic Movement

Italy has for two decades forged a much-heralded and widespread movement for school integration of people who are disabled. In that country the move to close segregated, specialized institutions came after close examination revealed that institutional populations were increasing, while the quality of societal life in general was seen as decreasing. In addition, when special educators, social workers, medical personnel, and psychologists worked in segregated settings they found themselves contributing to what were identified as the negative results.

By 1971, a general public outcry led to repudiation of segregation in public schools and social rehabilitative services in Italy. This in turn resulted in the beginning of legislation which required the inclusion of all individuals in all aspects of society. In addition, newly enacted laws specified the right to equal benefits in the schools for all children.

In Italy today, responsibility for integrating people with disabilities is urged on all individuals, not just specialized professionals. From the national and regional leaders to the teacher in the classroom and the worker in the factory is heard the sentiment expressed by a school director in Parma, "Disabled

persons who vary from the norm - whether physically, intellectually, or with productivity in work - have the inherent right to full participation in society."

As a result, United Nations observers cite Italy's integrated programs as the most advanced in Europe.

In the Spring of 1984 and 1986, the Division of Special Education and Rehabilitation, Syracuse University, sponsored seminars in Italy under the direction of Dr. Carol Berrigan. Participants observed schools and worksites in Florence, Rome, Parma, and Bologna, and dialogued with leaders of the integration movement in Italy. Dr. Berrigan's presentation will report, along with slides, Italy's integrated programs.

Paper presented at the Annual Conference of the Association  
for the Severely Handicapped (14th, Chicago, IL, October 29-30,  
1987)